The State of New Hampshire
**DEPARTMENT OF ENVIRONMENTAL SERVICES**

**Thomas S. Burack, Commissioner**

**LETTER OF DEFICIENCY**
**WD-WWEB/C 15-003**

May 8, 2015

Powder Mill Fish Hatchery
New Hampshire Fish and Game
Mr. Thomas Givetz
288 Merrymeeting Road
New Durham, New Hampshire 03855

Subject: National Pollutant Discharge Elimination System (NPDES)
Compliance Sampling Inspection (CSI)
Powder Mill Fish Hatchery (FH)
New Durham, NH
NPDES Permit No. NH0000710

Dear Mr. Givetz:

On April 14, 2015, as a representative of the New Hampshire Department of Environmental Services (DES), Water Division, Wastewater Engineering Bureau, I conducted a NPDES CSI at the Powder Mill Fish Hatchery. Objectives of the CSI included determining compliance with NPDES permit conditions, verifying the accuracy of permit-required information, and verifying the adequacy of permittee sampling and monitoring.

The following people were present during this CSI:

Thomas Givetz, Superintendent, Powder Mill Fish Hatchery, NH Fish and Game
Teresa Ptak, Environmental Inspector, DES

Enclosed is a copy of EPA's Water Compliance Inspection Report Form 3560-3, Attachment A-Sample Data Summary, and the inspection sample results. The laboratory results for Biochemical Oxygen Demand (BOD), Total Suspended Solids (TSS), Total Nitrogen, Ammonia Nitrogen and Total Phosphorus were within the allowable permit limitations. None of the samples were taken in accordance with Powder Mill Fish Hatchery's permit requirements, thus no results must be included in the April 2015 DMR calculations.

**DEFICIENCY: (Response required).**

During the inspection the following deficiency was noted:

1. Currently facility staff verify and document the composite sampler refrigerator at the end of the composite period only. Per 40CFR136.3 Table II, preservation during collection of a 24 hour composite must occur at $\leq 6^{o}C$.

    a. It was discussed that in/out composite sampler temperatures would be added to the bench sheet.

**REPEAT DEFICIENCY: (Noted in April 17, 2013 NPDES inspection – response required). If this repeat deficiency is noted in any subsequent inspection then DES may proceed immediately with formal enforcement action which may include an administrative fine.**

1. The facility did not sample for pH at outfall serial number 001 and 002 the week of September 14th to September 20th as required per permit Part I.A.1 & 2. Monitoring requirements stipulate once a week measurement.

    a. Meter was off site for annual calibration. The intra-agency spare meter was not located in time.
    b. NH Fish and Game staff have made arrangements for on site/central location annual calibration as to avoid extended equipment absence.

**RECOMMENDATIONS/OBSERVATIONS: (No response required).**

1. As part of the NPDES inspection, operation and maintenance of the facility laboratory and grounds were reviewed.

    a. Per permit Part B. 4. e. Best Management Practices (BMP) Plan Recordkeeping, records that document the frequency of cleaning, inspections, repairs, and chemical usage are to be maintained.
        i. Currently daily activities are included within the monthly chart excel sheet. It was discussed that cleaning activities (e.g. associated with settling tank) would be documented there for easy reference as well.

**CORRECTIVE ACTIONS REQUIRED:**

Describe all steps taken to correct the deficiencies identified by the inspector. This description should also include the dates the deficiency was corrected or the anticipated correction date. When the response is complete, the responsible official for the facility must sign the response. If the submitted response is acceptable to DES and the deficiency is not a repeat deficiency and/or has not resulted in environmental harm, DES will close out the inspection and no further action, other than continued compliance, is required by the permittee. If DES identifies repeat deficiencies or deficiencies that result in environmental harm in this or future inspections, DES may proceed immediately with enforcement.

DES requests that Powder Mill FH submit its response to this inspection by **June 8, 2015.** If DES does not receive a signed, complete response within the allowed time frame, DES may proceed with an appropriate enforcement action.

Please mail or email your inspection response to:

Teresa Ptak
NHDES/WD-WWEB
P.O. Box 95
Concord, NH 03302-0095

OR

Teresa.Ptak@des.nh.gov

Please be advised that DES will continue to monitor Powder Mill FH's compliance status, and that this letter does not provide relief against any existing or future violations.

If you have any questions regarding this matter, please contact me at 603-271-1494. Thank you for your cooperation.

Sincerely,

Paul Heirtzler, P.E., Esq.
Administrator
Wastewater Engineering Bureau

cc: DES, WD, WWEB/File
ec: Teresa Ptak, Environmental Inspector, WWEB
Tracy L. Wood, P.E., Compliance Supervisor, WWEB
Gretchen Hamel, Enforcement Coordinator, DES
Joy Hilton, USEPA Water Technical Unit

Attachments: EPA Form 3560-3 – Water Compliance Inspection Report
Attachment A-Sample Data Summary
April 14, 2015 Sample Results

Certified Mail RRR: 7011 3500 0001 0292 6353

United States Environmental Protection Agency
Washington, D.C. 20460

# Water Compliance Inspection Report

## Section A: National Data System Coding (i.e., PCS)

| Transaction Code | NPDES | yr/mo/day | Inspection Type | Inspector | Fac Type |
|---|---|---|---|---|---|
| 1 N 2 5 | 3 NH0000710 11 | 12 150414 17 | 18 S | 19 S | 20 3 |

Remarks: 21 ____ 66

| Inspection Work Days | Facility Self-Monitoring Evaluation Rating | B1 | QA | Reserved | Reserved |
|---|---|---|---|---|---|
| 67 10 69 | 70 4 | 71 N | 72 N | 73 74 | 75 80 |

## Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)

POWDER MILL FISH HATCHERY
288 MERRYMEETING ROAD
NEW DURHAM, NH 03855

POTW Name/Permit No.

| Entry Time/Date | Permit Effective Date |
|---|---|
| 8:56 AM 4/14/2015 | 12/22/2011 |
| **Exit Time/Date** | **Permit Expiration Date** |
| 11:22 AM 4/14/2015 | 12/21/2016 |

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

THOMAS GIVETZ
SUPERINTENDENT
Phone: (603)859-2041
Fax:

Other Facility Data (e.g., SIC NAICS, and other descriptive information)

Name, Address of Responsible Official/Title/Phone and Fax Number

JASON SMITH, CHIEF OF FISHERIES
NH FISH AND GAME
11 HAZEN DRIVE
CONCORD, NH 03301
Phone: (603)271-1744
Fax:

Contacted: ☐ Yes ☑ No

## Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

| | | | |
|---|---|---|---|
| ☑ Permit | ☑ Self Monitoring Program | ☐ Pretreatment | ☐ MS4 |
| ☑ Records/Reports | ☐ Compliance Schedules | ☐ Pollution Prevention | |
| ☑ Facility Site Review | ☑ Laboratory | ☐ Storm Water | |
| ☑ Effluent/Receiving Waters | ☑ Operations/Maintenance | ☐ Combined Sewer Overflow | |
| ☑ Flow Measurement | ☐ Sludge Handling/Disposal | ☐ Sanitary Sewer Overflow | |

## Section D: Summary of Findings/Comments

*(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)*

| *SEV Codes* | *SEV Description* |
|---|---|
| C0015 | Frequency of Sampling Violation |
| C0018 | Improper Analysis or Lab Error |

| | | |
|---|---|---|
| Signature of Inspector: Tunsa Ptak | Agency/Office/Phone and Fax Numbers: NHDES/WD/WWEB (603) 271-3908/4128 | 4/15/2015 |
| Signature of Management QA Reviewer: Tracy L. Wood, P.E. Tracy L Wood | Agency/Office/Phone and Fax Numbers: NHDES/WD/WWEB (603) 271-3908/4128 | 4/15/2015 |

# INSTRUCTIONS

## Section A: National Data System Coding *(i.e., PCS)*

Column 1: Transaction Code: Use N, C, or D for New, Change, or Delete. All inspections will be *new* unless there is an error in the data entered.

Columns 3-11: NPDES Permit No. Enter the facility's NPDES permit number - third character in permit number indicates permit type for U=unpermitted, G=general permit, etc.. *(Use the Remarks columns to record the State permit number, if necessary.)*

Columns 12-17: Inspection Date. Insert the date entry was made into the facility. Use the year/month/day format (e.g., 04/10/01 = October 01, 2004).

Column 18: Inspection Type*. Use one of the codes listed below to describe the type of inspection:

| | | | | | |
|---|---|---|---|---|---|
| A | Performance Audit | U | IU Inspection with Pretreatment Audit | ! | Pretreatment Compliance (Oversight) |
| B | Compliance Biomonitoring | X | Toxics Inspection | @ | Follow-up (enforcement) |
| C | Compliance Evaluation (non-sampling) | Z | Sludge - Biosolids | \| | Storm Water-Construction-Sampling |
| D | Diagnostic | # | Combined Sewer Overflow-Sampling | ] | Storm Water-Construction-Non-Sampling |
| F | Pretreatment (Follow-up) | $ | Combined Sewer Overflow-Non-Sampling | : | Storm Water-Non-Construction-Sampling |
| G | Pretreatment (Audit) | + | Sanitary Sewer Overflow-Sampling | - | Storm Water-Non-Construction-Non-Sampling |
| I | Industrial User (IU) Inspection | & | Sanitary Sewer Overflow-Non-Sampling | < | Storm Water-MS4-Sampling |
| J | Complaints | ^ | CAFO-Sampling | - | Storm Water-MS4-Non-Sampling |
| M | Multimedia | = | CAFO-Non-Sampling | > | Storm Water-MS4-Audit |
| N | Spill | 2 | IU Sampling Inspection | | |
| O | Compliance Evaluation (Oversight) | 3 | IU Non-Sampling Inspection | | |
| P | Pretreatment Compliance Inspection | 4 | IU Toxics Inspection | | |
| R | Reconnaissance | 5 | IU Sampling Inspection with Pretreatment | | |
| S | Compliance Sampling | 6 | IU Non-Sampling Inspection with Pretreatment | | |
| | | 7 | IU Toxics with Pretreatment | | |

Column 19: Inspector Code. Use one of the codes listed below to describe the *lead agency* in the inspection.

| | |
|---|---|
| A — | State (Contractor) |
| B — | EPA (Contractor) |
| E — | Corps of Engineers |
| J — | Joint EPA/State Inspectors—EPA Lead |
| L — | Local Health Department (State) |
| N — | NEIC Inspectors |
| O — | Other Inspectors, Federal/EPA, (Specify in Remarks columns) |
| P — | Other Inspectors, State, (Specify in Remarks columns) |
| R — | EPA Regional Inspector |
| S — | State Inspector |
| T — | Joint State/EPA Inspectors—State lead |

Column 20: Facility Type. Use one of the codes below to describe the facility.

1 — Municipal. Publicly Owned Treatment Works (POTWs) with 1987 Standard Industrial Code (SIC) 4952.
2 — Industrial. Other than municipal, agricultural, and Federal facilities.
3 — Agricultural. Facilities classified with 1987 SIC 0111 to 0971.
4 — Federal. Facilities identified as Federal by the EPA Regional Office.
5 — Oil & Gas. Facilities classified with 1987 SIC 1311 to 1389.

Columns 21-66: Remarks. These columns are reserved for remarks at the discretion of the Region.

Columns 67-69: Inspection Work Days. Estimate the total work effort (to the nearest 0.1 work day), up to 99.9 days, that were used to complete the inspection and submit a QA reviewed report of findings. This estimate includes the accumulative effort of all participating inspectors; any effort for laboratory analyses, testing, and remote sensing; and the billed payroll time for travel and pre and post inspection preparation. This estimate does not require detailed documentation.

Column 70: Facility Evaluation Rating. Use information gathered during the inspection (regardless of inspection type) to evaluate the quality of the facility self-monitoring program. Grade the program using a scale of 1 to 5 with a score of 5 being used for very reliable self-monitoring programs, 3 being satisfactory, and 1 being used for very unreliable programs.

Column 71: Biomonitoring Information. Enter D for static testing. Enter F for flow through testing. Enter N for no biomonitoring.

Column 72: Quality Assurance Data Inspection. Enter Q if the inspection was conducted as followup on quality assurance sample results. Enter N otherwise.

Columns 73-80: These columns are reserved for regionally defined information.

## Section B: Facility Data

This section is self-explanatory except for "Other Facility Data," which may include new information not in the permit or PCS (e.g., new outfalls, names of receiving waters, new ownership, other updates to the record, SIC/NAICS Codes, Latitude/Longitude).

## Section C: Areas Evaluated During Inspection

Check only those areas evaluated by marking the appropriate box. Use Section D and additional sheets as necessary. Support the findings, as necessary, in a brief narrative report. Use the headings given on the report form (e.g., Permit, Records/Reports) when discussing the areas evaluated during the inspection. The heading marked "Multimedia" may indicate medias such as CAA, RCRA, and TSCA.

## Section D: Summary of Findings/Comments

Briefly summarize the inspection findings. This summary should abstract the pertinent inspection findings, not replace the narrative report. Reference a list of attachments, such as completed checklists taken from the NPDES Compliance Inspection Manuals and pretreatment guidance documents, including effluent data when sampling has been done. Use extra sheets as necessary.

*Footnote: In addition to the inspection types listed above under column 18, a state may continue to use the following wet weather and CAFO inspection types until the state is brought into ICIS-NPDES: K: CAFO, V: SSO, Y: CSO, W: Storm Water 9: MS4. States may also use the new wet weather, CAFO and MS4 inspections types shown in column 18 of this form. The EPA regions are required to use the new wet weather, CAFO, and MS4 inspection types for inspections with an inspection date (DTIN) on or after July 1, 2005.

Attachment A
Sample Data Summary – To be completed with every inspection

Facility Name: POWDER MILL FH Date: 4/14/2015 Inspector: TPTAK

Sample Type: (Grab) or Composite Sample Time: 10:45AM Sampler: T. GIVETZ
Sample Location: OUTFALL 001
Is this the normal sample location for the plant effluent sampling? YES or (NO) If NO, explain: Typically composite sample

Were split samples collected? YES or (NO) Comments:

Sampling Acknowledgement: (Operator/other signature): Signature on COC Date/Time:

| Analysis | Analysis Method | Results | Permit Limit | Comments |
|---|---|---|---|---|
| BOD | 5210B | 0 mg/L | REPORT | REQUIRES COMPOSITE, DONE AS GRAB |
| TSS | 2540D | 0 mg/L | REPORT | |
| Total Phosphorus | LACHAT 10-115-01-1-F | 0.0222 mg/L | REPORT | |
| Ammonia Nitrogen | LACHAT 10-107-06-6-A | 0 mg/L | REPORT | ✓ |
| Total Nitrogen | CALCULATION | 0.271 mg/L | REPORT | ✓ |

Laboratory Analyses – attach NHPH Laboratory report to this attachment

Attachment A
Sample Data Summary – To be completed with every inspection

Facility Name: POWDER MILL FH Date: 4/14/2015 Inspector: TPTAK

Sample Type: (Grab) or Composite Sample Time: 10:56 AM Sampler: T. GIVETZ
Sample Location: OUTFALL 002
Is this the normal sample location for the plant effluent sampling? YES or (NO) If NO, explain: Typically composite sample

Were split samples collected? YES or (NO) Comments: _____

Sampling Acknowledgement: (Operator/other signature): Signature on COC Date/Time: _____

| Analysis | Analysis Method | Results | Permit Limit | Comments |
|---|---|---|---|---|
| BOD | 5210B | 2.6 mg/L | REPORT | REQUIRES COMPOSITE, DONE AS GRAB |
| TSS | 2540D | 0 mg/L | REPORT | |
| Total Phosphorus | LACHAT 10-115-01-1-F | 0.0536 mg/L | REPORT | |
| Ammonia Nitrogen | LACHAT 10-107-06-6-A | 0 mg/L | REPORT | |
| Total Nitrogen | CALCULATION | 0.467 mg/L | REPORT | |

Laboratory Analyses – attach NHPH Laboratory report to this attachment

NH DIVISION OF
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Friday, May 08, 2015

STERGIOS SPANOS
NHDES WASTEWATER ENGINEERING BUREAU
29 HAZEN DR
CONCORD NH 03301

RE: Workorder: A501657 - NPDES, INDUSTRIAL PERMITS
Project ID: 05-0021510 - NPDES INDUSTRIAL

Dear STERGIOS SPANOS:

Enclosed are the analytical results for the sample(s) received by the laboratory on Tuesday, Apr 14, 2015. Unless indicated as exceptions, the sample(s) met EPA requirements for hold times, preservation techniques, container types and other receipt conditions. Please contact us if you need measurement uncertainty values associated with radiological parameters. Results reported conform to the most current NELAC standard, where applicable, unless otherwise narrated in the body of the report. Any results reported for samples subcontracted to another laboratory are indicated on the report. Please refer to http://www2.des.nh.gov/CertifiedLabs/Certified-Method.aspx for a copy of our current NELAP certificate and accredited parameters.

We appreciate the opportunity to provide this analytical service for you. If you have any questions regarding this report or your results, please feel free to contact us.

The following signature indicates technical review and acceptance of the data.

Sincerely,

Lucio S. Barinelli, Ph.D.

Authorized Signature

Enclosures



**REPORT OF LABORATORY ANALYSIS**



ACCREDITED IN ACCORDANCE WITH THE nelac

NH DIVISION OF
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New Hampshire Public Health Laboratories
Department of Health and Human Services
29 Hazen Dr., Concord NH 03301
Phone: (603) 271-3445
Fax: (603) 271-2997

## DATA QUALIFIER DESCRIPTIONS

Workorder: A501657 - NPDES, INDUSTRIAL PERMITS

Project ID: 05-0021510 - NPDES INDUSTRIAL

The following are a list of some column headers and abbreviations with their meanings as used throughout the analysis report. Referring to them will assist you in interpreting your report.

RDL= The lowest value the laboratory calibrates its instrumentation for this parameter. Any instrumental estimate of results below the Report Limit is reported as Not Detected (ND).

DF= For some heavily contaminated samples, the laboratory must dilute samples to keep the final number within its calibration scale. This is referred to as the Dilution Factor. Final results and reporting limits are adjusted relative to the DF used.

QUAL= Indicates that the result has been qualified. Refer to the Analytical Report Comments and Qualifiers page for details.

LIMIT= Reflects the Maximum Contamination Level (MCL), if one exists, a secondary or recommended level or another State or Federal action level.

Surrogates = For some analyses, the laboratory adds a number of compounds to monitor analytical performance. These results are provided for your information.

| | |
|---|---|
| > = Greater than | < = Less than |
| mg/L = milligrams per Liter | ug/L = micrograms per Liter |
| mg/kg = milligrams per kilogram | ug/kg = micrograms per kilogram |
| P-A = Present/Absent | CTS/100 mL = Counts per 100 milliliters |
| CFU = Colony forming unit | MPN = Most Probable Number |
| pCi/L = picoCuries per Liter | |

J = Estimated value; analyte detected at less than the Reporting Limit but greater than the laboratory's Method Detection Limit.

B = Analyte detected in the method blank for the batch of samples. Its presence in the sample may be suspect.

E = Estimated value; result exceeded the upper calibration level for the parameter.

Radiological results are expressed as a number + an uncertainty factor. Uncertainty is a calculated measure of the precision around the reported value.

All results for pH and residual chlorine samples analyzed more than 15 minutes after time of collection shall be considered QUALIFIED.



## REPORT OF LABORATORY ANALYSIS

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New Hampshire Public Health Laboratories
Department of Health and Human Services
29 Hazen Dr., Concord NH 03301
Phone: (603) 271-3445
Fax: (603) 271-2997

## SAMPLE SUMMARY

Workorder: A501657 - NPDES, INDUSTRIAL PERMITS
Project ID: 05-0021510 - NPDES INDUSTRIAL

| Lab ID | Sample ID | Ref ID | Matrix | Date Collected | Date Received | Misc Info |
|---|---|---|---|---|---|---|
| A501657001 | OUTFALL 001 | POWDER MILL FH | WATER | 4/14/2015 10:45 | 4/14/2015 | |
| A501657002 | OUTFALL 002 | POWDER MILL FH | WATER | 4/14/2015 10:56 | 4/14/2015 | |

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## ANALYTICAL REPORT COMMENTS AND QUALIFIERS

Workorder: A501657 - NPDES, INDUSTRIAL PERMITS
Project ID: 05-0021510 - NPDES INDUSTRIAL

**Parameter Footnotes**

[1] Result is from the x1.5 dilution. MS and MSD recoveries are 101 and 96% on the x12 dilution.

[2] Method Blank = 0

[3] Result is from the x1.5 dilution. MS and MSD recoveries are 101 and 101% on the x12 dilution.

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# ANALYTICAL RESULTS

Workorder: A501657 - NPDES, INDUSTRIAL PERMITS
Project ID: 05-0021510 - NPDES INDUSTRIAL

Lab ID: **A501657001** Matrix: WATER
Sample ID: **OUTFALL 001** Sample Type: SAMPLE
Description: POWDER MILL FH Collector : THOMAS GIVETZ

| Parameters | Results | Units | RDL | DF | Prepared | Analyzed | Limit | Qual |
|---|---|---|---|---|---|---|---|---|
| **Wet Chemistry** | | | | | | | | |
| Analytical Method: SM 5210B | | | | | | | | |
| Biochemical Oxygen Demand, 5 | <3 | mg/L | | 1 | | 4/15/2015 14:00 | | 1 |
| Analytical Method: LACHAT 10-115-01-1-F | | | | | | | | |
| Total Phosphorus | 0.0222 | mg/L | 0.0050 | 1 | | 4/30/2015 10:22 | | |
| Analytical Method: LACHAT 10-107-04-1-C | | | | | | | | |
| Nitrate-Nitrogen | ND | mg/L | 0.050 | 1 | | 4/14/2015 13:41 | 10 | |
| Analytical Method: LACHAT 10-107-06-2-E | | | | | | | | |
| Total Kjeldahl Nitrogen | 0.26 | mg/L | 0.25 | 1 | | 4/21/2015 11:05 | | |
| Analytical Method: LACHAT 10-107-06-6-A | | | | | | | | |
| Ammonia Nitrogen | ND | mg/L | 0.20 | 1 | | 5/6/2015 15:58 | | |
| Analytical Method: LACHAT 10-107-04-1-C | | | | | | | | |
| Nitrite-Nitrogen | ND | mg/L | 0.050 | 1 | | 4/14/2015 13:41 | 1 | |
| Analytical Method: LACHAT 10-107-04-1-C | | | | | | | | |
| Nitrate+Nitrite-Nitrogen | ND | mg/L | 0.050 | 1 | | 4/14/2015 13:41 | | |
| Analytical Method: SM 2540D | | | | | | | | |
| Total Suspended Solids | ND | mg/L | 10 | 1 | | 4/21/2015 16:00 | | 2 |
| Analytical Method: Calculation | | | | | | | | |
| Total Nitrogen | 0.271 | mg/L | | 1 | | 4/23/2015 08:30 | | |

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29 Hazen Dr., Concord NH 03301
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## ANALYTICAL RESULTS

Workorder: A501657 - NPDES, INDUSTRIAL PERMITS
Project ID: 05-0021510 - NPDES INDUSTRIAL

Lab ID: **A501657002** Matrix: WATER
Sample ID: **OUTFALL 002** Sample Type: SAMPLE
Description: POWDER MILL FH Collector : THOMAS GIVETZ

| Parameters | Results | Units | RDL | DF | Prepared | Analyzed | Limit | Qual |
|---|---|---|---|---|---|---|---|---|
| **Wet Chemistry** | | | | | | | | |
| Analytical Method: SM 5210B | | | | | | | | |
| Biochemical Oxygen Demand, 5 | 2.6 | mg/L | | 1.5 | | 4/15/2015 14:00 | | 3 |
| Analytical Method: LACHAT 10-115-01-1-F | | | | | | | | |
| Total Phosphorus | 0.0536 | mg/L | 0.0050 | 1 | | 4/30/2015 10:23 | | |
| Analytical Method: LACHAT 10-107-04-1-C | | | | | | | | |
| Nitrate-Nitrogen | 0.050 | mg/L | 0.050 | 1 | | 4/14/2015 13:42 | 10 | |
| Analytical Method: LACHAT 10-107-06-2-E | | | | | | | | |
| Total Kjeldahl Nitrogen | 0.42 | mg/L | 0.25 | 1 | | 4/21/2015 11:06 | | |
| Analytical Method: LACHAT 10-107-06-6-A | | | | | | | | |
| Ammonia Nitrogen | ND | mg/L | 0.20 | 1 | | 5/6/2015 16:02 | | |
| Analytical Method: LACHAT 10-107-04-1-C | | | | | | | | |
| Nitrite-Nitrogen | ND | mg/L | 0.050 | 1 | | 4/14/2015 13:42 | 1 | |
| Analytical Method: LACHAT 10-107-04-1-C | | | | | | | | |
| Nitrate+Nitrite-Nitrogen | 0.050 | mg/L | 0.050 | 1 | | 4/14/2015 13:42 | | |
| Analytical Method: SM 2540D | | | | | | | | |
| Total Suspended Solids | ND | mg/L | 10 | 1 | | 4/21/2015 16:00 | | 2 |
| Analytical Method: Calculation | | | | | | | | |
| Total Nitrogen | 0.467 | mg/L | | 1 | | 4/23/2015 08:30 | | |

# NH PUBLIC HEALTH LABORATORIES-WATER LAB LOGIN AND CUSTODY SHEET

(Laboratory Policy: Samples not meeting method requirements will be analyzed at the discretion of the DPHS, PHL.)
Samples must be delivered in a cooler with ice or ice packs.

LAB ACCOUNT (Billing) 05-0021510 One Stop Project: N/A NHDES Site Number N/A

Description : Powder Mill FH Town: New Durham Temp. °C. 3.3°C OK

Collected by: T. GIVETZ Contact & Phone # TPtak x1494

| Sample Location/Station ID | Date Time Sampled | # of Containers | Matrix | Total Phosphorus | BOD/TSS | Total Nitrogen (TKN, NO2-NO3) | Ammonia Nitrogen | | | Sampler Comments | Lab Login # |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Outfall 001 | 4/14/15 10:45AM | 3 | AQ | X | X | X | X | | | non-chlorinated system | A501657001 04/14/15 10:45 05-0021510 |
| Outfall 002 | 4/14/15 10:56AM | 3 | AQ | X | X | X | X | | | non-chlorinated system | A501657002 04/14/15 10:56 05-0021510 |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

Relinquished By _____ Date and Time 4/14/15 11:03 Received By Tanya Ptak 4/14/15 11:03AM

Relinquished By Tanya Ptak 4/14/15 12:19PM Date and Time _____ Received For Laboratory By _____

Section No.: 22.0
Revision No.: 7
Date 07-2011
Page 1 of 1

Matrix: A= Air S= Soil AQ= Aqueous ( Ground Water, Surface Water, Drinking Water, Waste Water ) x Other: _____

Page 1 of 1 Data Reviewed By _____ Date 05-08-2015